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APPLICANTS

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**** CONTINUING DATA *******
 This application is a CIP of 10/673,725 09/29/2003 *SW*
 and is a CIP of 10/746,465 12/24/2003

**** FOREIGN APPLICATIONS *******
N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **** SMALL ENTITY ****
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Net after Allowance Verified and Acknowledged <i>SW</i> Examiner's Signature _____ Initials _____	STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 2
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ADDRESS
 00909
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TITLE
 System and method for monitoring the operational condition of a motor vehicle

FILING FEE RECEIVED 459	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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